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IDWR/NORTHERN

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: March 30, 2018

Water right number: 95-11491

FRANK ABBOTT
21657 W RIVERVIEW DR
POST FALLS ID 83854
Telephone Number: ~~2087731735~~ 208-964-2906

DEIDRE ABBOTT
21657 W RIVERVIEW DR
POST FALLS ID 83854
Telephone Number: ~~2087731735~~ 208-964-1299

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

QUANTITY:
~~"THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000 GALLONS PER DAY."~~ *FL*

2. Describe the changes you wish to make in the proposed recommendation:

~~"THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 27,648 GALLONS PER DAY."~~ *FL*

3. Give a brief explanation as to why you disagree with these portions:

~~"WHILE A 13,000 GALLON PER DAY CAP MAY CONSERVE WATER FOR A SUBURBAN HOME, A 47% USAGE CAP ON OUR RURAL RESIDENCE ON 5 ACRES WILL HINDER OUR IRRIGATION AND PROVE POINTLESS CONSIDERING ANY RUNOFF IS RETURNED DIRECTLY TO THE AQUIFER."~~ *FL*

I AGREE with this proposed recommendation: no changes need to be made.

DATE: 3/6/2018 SIGNATURE: *Frank Abbott*

Please print your name: FRANK ABBOTT

IDWR Regional Office, 7600 N MINERAL DR STE 100, COEUR D ALENE, ID 83815-7763, (208) 762-2800